



**Lake County, Florida Development Staff Review  
APPLICATION FOR ZONING PERMIT/BUILDING PERMIT**

**DRS DATE** \_\_\_\_\_ **ALT. KEY** \_\_\_\_\_ **PERMIT APP. NO.** \_\_\_\_\_  
(No Expiration Date)

**OWNER'S NAME** \_\_\_\_\_ **PHONE** (\_\_\_\_) \_\_\_\_\_

**OWNER'S ADDRESS (MAILING)** \_\_\_\_\_

**CITY** \_\_\_\_\_ **STATE** \_\_\_\_\_ **ZIP CODE** \_\_\_\_\_

**JOB ADDRESS** \_\_\_\_\_  
(if available) \_\_\_\_\_ Street \_\_\_\_\_ City \_\_\_\_\_ Zip Code \_\_\_\_\_

**PROPOSED WORK** \_\_\_\_\_  
(Permit applied for: attach plot plan, and identify square footage and impervious surfaces on plot plan.)

**LEGAL DESCRIPTION:** (Attach Property Record Card) Section \_\_\_\_ Township \_\_\_\_ Range \_\_\_\_  
Subdivision \_\_\_\_\_ Phase \_\_\_\_\_ Lot \_\_\_\_\_ Block \_\_\_\_\_

**EXISTING SITE DEVELOPMENT** \_\_\_\_\_  
(Include all buildings on the property: indicate if building is to be replaced.)

**Residential Development Only** Est. Value Structure \$\_\_\_\_\_ + Land \$\_\_\_\_\_ = Combined Value \$\_\_\_\_\_

Application is hereby made to obtain a permit to do the work and installations as indicated. By signing this application, I certify that no work or installation has commenced prior to the issuance of a permit and that all work will be performed to meet the standards of all laws regulating construction and development in this jurisdiction. I understand that a separate permit must be secured for ELECTRICAL WORK, PLUMBING, SIGNS, WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS AND AIR CONDITIONERS, etc.

**FEE SIMPLE TITLEHOLDER AND ADDRESS (IF OTHER THAN OWNER)** \_\_\_\_\_

**CONTRACTOR'S NAME** \_\_\_\_\_ **PHONE** (\_\_\_\_) \_\_\_\_\_

**BONDING COMPANY AND ADDRESS** \_\_\_\_\_

**ARCHITECT/ENGINEER'S NAME AND ADDRESS** \_\_\_\_\_ **PHONE** (\_\_\_\_) \_\_\_\_\_

**MORTGAGE LENDER AND ADDRESS** \_\_\_\_\_

**Central Water and Sewer Connection Requirements: Pursuant to Lake County Land Development Regulations (LDR's), Chapter VI, Section 6.12.01, development within 300 feet of central water or 1,000 feet of central sewer must connect to that supplier.**

Water supplier (or well) \_\_\_\_\_ Sewer provider (or septic tank) \_\_\_\_\_ Power company \_\_\_\_\_

Are there any trees on the property that will be required to be removed in association with this permit? \_\_\_\_\_

Are there any wetlands, water bodies, flood-prone areas, etc., on or adjacent to the property? \_\_\_\_\_

Does the property front on a County maintained road, non-maintained road, or a private road or easement? \_\_\_\_\_

Have impact fees been prepaid or concurrency capacity reservation fees been paid for the property? \_\_\_\_\_

**DIRECTIONS TO PROPERTY**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Initials of County staff person reviewing the above information for completeness: \_\_\_\_\_

**OWNER'S AFFIDAVIT:** I certify that all the foregoing information is accurate and that all work will be done in compliance with all applicable laws regulating construction and development, and the building is designed per code-mandated wind load design.

**WARNING TO OWNER:** Your failure to record a Notice of Commencement may result in your paying twice for improvements to your property. If you intend to obtain financing, consult with your lender or an attorney before recording your Notice of Commencement. The issuance of a building permit does not assure the building setbacks have been met or that the structure does not encroach on an easement. The owner and/or contractor have the sole responsibility of determining compliance with setbacks and non-encroachment of easements. If the County determines the structure does not meet applicable setbacks or improperly encroaches on an easement, the owner is responsible for moving the structure, restoring the easement to its original condition, or otherwise making the structure comply with County setbacks and other land use requirements.

\_\_\_\_\_  
**OWNER'S SIGNATURE**

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_,  
by \_\_\_\_\_ who is personally known to me or has produced  
\_\_\_\_\_ as identification.

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
**CONTRACTOR'S SIGNATURE**

**State Certification or Registration No.**

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_,  
by \_\_\_\_\_ who is personally known to me or has produced  
\_\_\_\_\_ as identification.

\_\_\_\_\_  
Notary Public

Site Plan No. \_\_\_\_\_ Trees Required <sup>Per</sup> Site Plan Districts: Commissioner \_\_\_\_\_ Road \_\_\_\_\_ School \_\_\_\_\_  
Land Use Designation \_\_\_\_\_ Zoning District \_\_\_\_\_ Green Swamp ACSC \_\_\_\_\_ Wekiva RP Area \_\_\_\_\_ 1st Floor \_\_\_\_\_  
St. Johns \_\_\_\_\_ Wetland Affidavit \_\_\_\_\_ Flood Map Page \_\_\_\_\_ ED \_\_\_\_\_ Census Tract \_\_\_\_\_ Flood Permit \_\_\_\_\_  
Minimum S.F. \_\_\_\_\_ Setbacks: Front <sup>Per</sup> Site Plan 2nd Front <sup>Per</sup> Site Plan Side <sup>Per</sup> Site Plan Rear <sup>Per</sup> Site Plan Wetlands/Water Body \_\_\_\_\_  
Lot Size: \_\_\_\_\_ Impervious Surface: \_\_\_\_\_ ISR (IS/LS) \_\_\_\_\_ Max ISR: \_\_\_\_\_ Road No. \_\_\_\_\_  
Comments \_\_\_\_\_

This application and associated plot plan has been reviewed for compliance with the Lake County Comprehensive Plan and Land Development Regulations.

Zoning application approved by \_\_\_\_\_ Date \_\_\_\_\_

**HEALTH DEPARTMENT USE ONLY** Staff \_\_\_\_\_ Permit No. \_\_\_\_\_

No. of Bedrooms \_\_\_\_\_ Height above natural grade \_\_\_\_\_ Date \_\_\_\_\_

Comments \_\_\_\_\_